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T-179 P.002/002

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APPLICATION NO.	FILING DATE		first named inven	TOR	ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/086,838	02/28/2002		Tamer-Kadons		010519B1		3037	
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CFR_1.363).	cc address or indication of "Fe	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,			R. Milikov	sky		
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PLEASE NOTE: Unler recordation as set forth	s an assignee is identified be in 37 CFR 3.11. Completion	elow, no assignee of of this form is NOT	data will appear on t I a substitute for filin	be pûtent. If un assigr g an assignment.	nee is identifi	ed below, the do	ocument has been fi	led for

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San Diego, California

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72 Authorized Signature Dmitry R. Milikovsky Typed or printed name

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41,999 Registration No.

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BEST AVAILABLE COPY APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/086.838 02/28/2002 Tamer-Kadous 010519B1 3037 TITLE OF INVENTION: RATE SELECTION FOR AN OFOM SYSTEM APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEB TOTAL FEE(S) DUE DATÉ DUÉ \$1400 nonprovisional NO \$300 \$1700 01/06/2006 **EXAMINER** ART UNIT CLASS-SUBCLASS SHEW. JOHN 2664 370-208000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). For printing on the patent front page, list Dmitry R. Milikovsky the names of up to 3 registered patent attorneys or agents OR, alternatively, Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent aworneys or agents. If no name is listed, no name will be printed. 2 Sandip S. (Micky) Mint "Fco Address" indication (or "Feo Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Costomer Number is required. Philip Wadsworth 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Qualcomm Incorporated San Diego, California Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group eatily 🚨 Government 4a. The following fee(s) are enclosed: 40. Payment of Fee(5): Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached. EPThe Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 17-0026 (enclose an extra copy of this form). Advance Order - # of Copies

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